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May 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N08088 (9)
1. Corporation Name
THE CHURCH AT SIESTA BAY, INC.



Principal Place of Business 11766 CARAVEL CIRCLE FT. MYERS FL 33908	Mailing Address 11766 CARAVEL CIRCLE FT. MYERS FL 33908-3942
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3. Date Incorporated or Qualified 03/11/1985	3a. Date of Last Report 04/24/1996
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21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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4. FEI Number 59-2725351	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**STOCKHAM, SUSAN L.
2520 SOUTH TAMiami TRAIL
SARASOTA FL 34239**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: *Susan L. Stockham* DATE: **4/15/97**

12. OFFICERS AND DIRECTORS

TITLE	CD	<input type="checkbox"/> DELETE
NAME	KAUFFMAN, RUSSELL R.	
STREET ADDRESS	11766 CARAVEL CIRCLE	
CITY-ST-ZIP	FT. MYERS FL 33908	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	HANST, GEORGENE	
STREET ADDRESS	16579 CORIANDER	
CITY-ST-ZIP	FT. MYERS FL 33908	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HENDRICKS, HOWARD	
STREET ADDRESS	1302 MCGREGOR PARK	
CITY-ST-ZIP	FT MYERS FL	
TITLE	AT	<input checked="" type="checkbox"/> DELETE
NAME	BUTZIN, ROSE	
STREET ADDRESS	16981 SUMMERLIN RD H-271	
CITY-ST-ZIP	FT. MYERS FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Treasurer, Director
4.3 STREET ADDRESS	Butzin, Rose
4.4 CITY-ST-ZIP	16981 Summerlin RD. - H271 Ft. Myers FL. 33908
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Russell R. Kauffman* DATE: **4/15/97** DAYTIME PHONE: **(813) 466-6540**

CR2E037 (9/96)